

# African-American Male National Conference 2007



## Registration Form

October 18–19, 2007

Adam's Mark Hotel

Indianapolis, Indiana



Name \_\_\_\_\_

Title/Position \_\_\_\_\_

Name of Business or Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Daytime Telephone (\_\_\_\_) \_\_\_\_\_ Alternate Telephone (\_\_\_\_) \_\_\_\_\_

### Please indicate your conference attendance:

#### Adults

- |  |   |
|--|---|
| <input type="checkbox"/> Advance Registration One Day \$110  | <input type="checkbox"/> College Students Two Days \$68 |
| <input type="checkbox"/> Advance Registration Two Days \$135 | <input type="checkbox"/> Thursday Luncheon Only \$30    |
| <input type="checkbox"/> On-Site One Day Registration \$135  | <input type="checkbox"/> Friday Luncheon Only \$30      |
| <input type="checkbox"/> On-Site Two Day Registration \$160  |   |

*Prices include meals for each day registered.*

#### Youth

- ☐ Friday, October 19 Only—Registration \$25, Chaperone \$35

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*Please return the registration form and a check made payable to:*

**The Indiana Commission on the Social Status of Black Males**

c/o Indiana Family and Social Services Administration/

Division of Family Resources

402 West Washington Street, IGCS—Room West 392, Indianapolis, Indiana 46204

**For more information, contact Steven L. Ingram: 317-233-8849 - Steven.Ingram@fssa.in.gov**